St Simeon Village

Performance Report

261 Hyatts Road
Plumpton NSW 2761
Phone number: 02 9675 3285

**Commission ID:** 0374

**Provider name:** Serbian Orthodox Diocese Aged Care and Education Property Fund

**Assessment Contact - Site date:** 9 November 2021

**Date of Performance Report:** 8 December 2021

# Performance report prepared by

G Cherry, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 3 Personal care and clinical care** | **Non-compliant** |
| Requirement 3(3)(a) | Non-compliant |
| Requirement 3(3)(g) | Non-compliant |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Assessment Contact - Site; the Assessment Contact - Site report dated 9 November 2021 was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others
* the provider did not submit a response to the Assessment Contact - Site report
* the Performance Reports dated 19 November 2020 and16 April 2021
* information received by the Commission from members of the community

# STANDARD 3 NON-COMPLIANTPersonal care and clinical care

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

A decision of Non-compliant in one or more requirements results in a decision of Non-compliant for the Quality Standard.

The Assessment Team assessed Requirements (3)(a) and (3)(g) in this Standard, all other requirements in this Standard were not assessed.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Non-compliant

*Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:*

1. *is best practice; and*
2. *is tailored to their needs; and*
3. *optimises their health and well-being.*

Sampled consumers and representatives expressed satisfaction with care and services provided. The service demonstrated effective processes in relation to restrictive practices and skin integrity detailing a reduction in the use of bedrails, chemical restraint medications and effective wound management outcomes.

However, the service did not demonstrate behavioural and pain monitoring needs are tailored to consumer’s individual needs or provided in line with best practice principles.

The Assessment Team bought forward evidence while staff are documenting observations in behaviour and pain monitoring charts, this information is not being used to identify causal factors in relation to escalating behaviours. The service utilises an electronic application which is not linked to the care documentation system. The service did not demonstrate an effective monitoring system to demonstrate consumers pain management needs are identified and/or results of monitoring are reviewed and evaluated for effectiveness.

For one consumer exhibiting resistive behaviours during provision of personal care, the service did not demonstrate consideration had been given to causal factors (such as experiencing pain). Strategies for managing resistive behaviours are generic and do not support staff in providing care to address consumer’s individual needs.

The Assessment Team bought forward evidence for two consumers the service did not demonstrate monitoring and/or review of medication changes occurs to evaluate the effectiveness and/or ensure consumers pain management needs are met.

The approved provider did not submit a response to the evidence bought forward by the Assessment Team.

I find this requirement is non-compliant.

### Requirement 3(3)(g) Non-compliant

*Minimisation of infection related risks through implementing:*

1. *standard and transmission based precautions to prevent and control infection; and*
2. *practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.*

The service has not implemented appropriate processes to ensure adherence to NSW Health Orders in relation to the Covid-19 pandemic. Staff practices do not consistently align with appropriate infection control practices and Public Health directives.

The Assessment Team bought forward evidence an unvaccinated priest entered the service to provide spiritual blessings to consumers. While the service implemented some actions to minimise risk to consumers, allowing the unvaccinated priest (who was not wearing a mask) into the service is in breach of the *NSW Public Health (Covid-19 Care Services) Order 2021 Part 2, Item 8 (3) A visitor must not enter or remain on the premises of a residential aged care facility unless the visitor is fully vaccinated*.

Management said they implemented a 48-hour period of monitoring all consumers after the priest’s visit and advised, of the current consumer cohort, approximately 25% are not vaccinated against Covid-19. They acknowledged by breaching the relevant health directives consumers were exposed to a significant risk.

The service has a nominated Infection Prevention and Control lead (IPC) and registered staff demonstrated knowledge of standard and universal precautions required for consumers diagnosed with a transmittable infection. However, documentation review identified the service’s Outbreak Management documentation is not contemporaneous in guiding staff in effectively managing an outbreak.

The Assessment Team observed a lack of disposable masks and hand sanitising equipment available for staff use. Staff were observed to be in breach of appropriate infection prevention practices including, inappropriate wearing, touching and removal of masks when communicating with others. Not all rooms and/or communal areas had density signage in place to guide those accessing these areas in adherence to public health directives. Seating within communal areas was not situated to ensure appropriate distancing.

Consumer representatives interviewed expressed positive feedback in relation to visitor restrictions and consumer care during the period of required lockdown. Staff said some visitation was allowed during this period. The Assessment Team identified processes implemented to minimise risk to consumers during visitation periods did not adhered to appropriate distancing in line with Public Health directives.

The approved provider did not submit a response to the evidence bought forward by the Assessment Team.

I find this requirement is non-compliant.

# Areas for improvement

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

* Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:
	+ is best practice; and
	+ is tailored to their needs; and
	+ optimises their health and well-being.
* Minimisation of infection related risks through implementing:
	+ standard and transmission-based precautions to prevent and control infection; and
	+ practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.